

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>P. 1002</i>		
O.I.P.E. CLASSIFIER		<i>59</i>	<i>10-8</i>
FORMALITY REVIEW		<i>69300</i>	

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/10/03
2	✓	✓	10/10/03
3	✓	✓	10/10/03
4	✓	✓	10/10/03
5	✓	✓	10/10/03
6	✓	✓	10/10/03
7	✓	✓	10/10/03
8	✓	✓	10/10/03
9	✓	✓	10/10/03
10	✓	✓	10/10/03
11	✓	✓	10/10/03
12	✓	✓	10/10/03
13	✓	✓	10/10/03
14	✓	✓	10/10/03
15	✓	✓	10/10/03
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18	✓	✓	10/10/03
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25	✓	✓	10/10/03
26	✓	✓	10/10/03
27	✓	✓	10/10/03
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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